

**SERVICE EMPLOYEES INTERNATIONAL UNION
HEALTHCARE 1199NW
ORAL HISTORY PROJECT**

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VICKI NEUMEIER OF SEIU HEALTHCARE 1199NW

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INTERVIEWERS: Quinn Rao

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QUINN RAO: 00:00:16

Thank you so much for sitting down with us. First thing we'd love to know is just a little bit about your background, your upbringing, and family. What got you into healthcare?

VICKI NEUMEIER: 00:00:35

You couldn't have anticipated that I would become a nurse. In high school, I certainly had no thoughts of that.

My family was non college educated. My dad was an immigrant from Europe. He came when he was 14, no, maybe 16. [He] came from Germany. His parents—dad was German, mother was English. He married my mother, when he was in the Air Force and she was from a farming family in Kansas. They settled in Massachusetts, because that's where my [dad's] family was based at that point. [I] grew up in a suburban town

much like say, Bellevue, Washington, back in the day before it got huge and (*laughs*) minorities were not really present in that town. It was pretty much a white town and a lot of upwardly mobile families, put it that way.

My generation was the first generation to go to college. I went to the University of Massachusetts, studied sociology, got out of school, was married. My husband and I moved to Seattle so he could go to graduate school [and] get his PhD in sociology.

I thought I would get a job. That was 1971. Boeing had just laid off 50,000 people and although signs were up in Seattle, "The last person to leave Seattle, please turn out the lights." I finally found a job working in a factory soldering projectors. My dad had been involved in some unions, historically—not always—and I thought, you know, these guys on this assembly line really need a union. I started talking about that at work, and really got shut down pretty quickly. The boss was all over me.

Anyway, decided this kind of a job wasn't for me. I decided to go back to school. What should I do? I don't know. Maybe go to law school. That's what my sister did. That's what my brother did. I didn't really want to be a lawyer. That kind of life didn't interest me. I wanted to kind of be like my mom, a stay at home kind of mom, maybe work part time.

Then I found out they were giving away buckets of money to go to nursing school because there was such a shortage at that time. I thought, Oh, okay, I'll do that. Not only was my tuition paid, my books paid, it gave me a living stipend. My call to nursing was not a call to nursing, it was a call to an easier, what I thought, life (*laughs*). Another deception.

Before too long, I had a daughter, eventually got divorced, and I was in a position of being a single mother. I was a single mother almost right after we formed the union and so grateful that we did form the union. I don't know how I could have possibly raised my daughter without the improvements that the union made, without the difference that the union made in so many ways.

So, 1983—let's see—I graduated from nursing school in 1981, went to work for Group Health, had no intention of working anywhere else. I loved the idea of Group Health.

No, not 1981, back up—'75—the summer after I started working, there was a city wide strike. The WSNA was the only representation that nurses had back at that time, and they called for a city wide strike. We joined even though we had it actually better than most of the other hospitals in town anyway.

It was a terrible strike. It was very poorly organized. Nobody won anything. People lost their positions. If they were on day shift, they got bumped to night shift. It was really a disaster and that experience made me think, We really need a real union, not this WSNA. I mean, they're good on professional issues and all that, but as a representative body, they were terrible. They were led by managers and academics. They weren't led by the frontline.

Now, things have changed with the WSNA and they have improved. They had to, they had to improve to keep up with us, basically. At that time, they were not a good bargaining unit. When this idea kind of started bubbling up about Let's form a real union, I was really supportive at that idea, and did a lot of work.

In my area, I was working in the hospital over on the Eastside, at the time. I did a lot of work trying to get people to understand why we really needed a real union. We voted to decertify the WSNA and to join ourselves in our own friendly union, which we initially called the Group Health Nurses Union. There were 1600, something like that, nurses—just nurses. That was the beginning.

QUINN 00:07:20

You mentioned the union brought a lot of changes to you personally into the workplace. What were some of the working conditions like prior to the union—what did an average day look like for yourself?

VICKI 00:07:34

An average day was so unpredictable. I was working in the ICU [Intensive Care Unit] and the census in ICU varies from zero to every bed filled. The acuity of the patients also varies from: you need two nurses for one patient, so you can take maybe two, three patients, yourself. Staffing was a huge issue. How many nurses would we need on a day, and that would vary hour to hour, if somebody died or got better and moved out.

That changed the dynamic of the day. The manager would come along and say, "Oh, you discharged that one and that one died. You go home, you're done for the day." And without pay, or you could use your vacation hours. You didn't have a predictable paycheck. In that time period, you could never count on your paycheck.

You could also be called in on your day off. And if you had been shorted hours yesterday, of course you were gonna say yes. You were basically on call 24/7 to this job trying to get your paycheck.

That all changed in 1989 when we went on the 39 days strike. One of the biggest wins was the Low Census Fund and they could never send you home against your will again. They could ask for volunteers. [If] somebody wanted to go, great. Almost always somebody wanted to go. But if no one wanted to go then they had to find a project for you to do at work. Keep you there and pay you.

That paycheck protection was huge—huge!—made a huge difference in our lives and we won better wages. In 1989, we settled a strike, but the real payoff came the next time we went to the table, when they put more money than we even asked for, out there. You know—did not want another strike. We were just shocked at how much they were offering for wages that following session that we went to the bargaining table. Amazing.

QUINN 00:10:23

Would you mind telling us a little bit more about how you found 1199, specifically, from what got you involved with that union?

VICKI 00:10:34

The organizing committee was looking for the best fit for a union. We wanted a union that was member led. Driven from the bottom, not the top. We wanted a democratic union. We wanted a progressive union that thought about things like civil rights, equity, and inclusion.

We found 1199 New York to be a great model. I wish I'd done the research to remember what that organization was that they belonged to, that was—I don't even know if it still exists, but there was another—it wasn't SEIU [Service Employees International Union] at the time—it was another union. They had some problems and that union kind of broke up and part of them went to SEIU, and we joined the ones that went to SEIU.

QUINN 00:11:44

What was your role in that organizing, specifically?

VICKI 00:11:48

Talking. Talking to people. Talking to my co-workers. Having meetings, having meetings after work. Going out to breakfast—I work night shift at the time—going out to breakfast with people so we could talk about how to organize ourselves into a new union.

QUINN 00:12:05

What did you find to be your individual push to organize?

VICKI 00:12:10

I was, frankly, disgusted by the failure of that strike, that WSNA [Washington State Nurses Union] led back in '76. Ever since then, I thought, Geez, you know, maybe we should be teamsters. Maybe we should..., you know anything but this WSNA thing. I mean, they have their good points, but they were not good at being a union. They weren't a union.

QUINN 00:12:41

On the topic of what makes good organizing, what makes bad organizing [inaudible] ____ What were the strategies that were most effective or ineffective throughout your journey? [inaudible] ____

VICKI 00:12:52

We imported an organizer, Glenn Goldstein, from New York. He was absolutely amazing. [He] probably worked 20 hours a day. [He] was willing to talk to anybody, go anywhere. He had a lot of experience. He knew the stories that he could tell about what happened in New York, and what they accomplished in New York. It was storytelling kind of stuff that made people listen, to think about how this could be different.

QUINN 00:13:45

And what led up exactly to the [inaudible] ____ strike. What did it look like behind the scenes?

VICKI 00:13:53

1989—we were frustrated at the bargaining table. We wanted to make progress. We had formed this union to make progress and we weren't getting there. We wanted some changes that were basically unheard of.

We kind of hit a brick wall and we were talking about this idea of low census is wrong. You can't treat a professional registered nurse like you treat someone who picks grapes for a living. If the grapes aren't ripe, you don't work, right? That's not the kind of atmosphere that we wanted for our nurses. We wanted them to have a professional job and that included predictable pay. There were a lot of issues. The money was terrible.

When I started my career in nursing, a checker at Safeway across the street made more money than me - as a professional nurse. They had a union at Safeway, UFCW [United Food and Commercial Workers]. They were on strike the summer I started my career - for more money - and they made more than I did as a professional nurse. We knew we had a long way to go, and we were just kind of hitting this brick wall.

No, it's always been this way. I'm not gonna change that. You have it slightly better than Swedish or Virginia Mason. And we did!

We definitely had better healthcare. We had zero cost for health care-zero-no premium, no copay, no nothing, at the time. For you and your spouse and your family. Nothing. We worked at Group Health.

They did have a point. We did have better in that way, but we were looking for more. We knew the only way to do it is to stand up and [it] took 39 days. That's the year we won the Low Census Fund and it changed the whole idea of how you could protect your paycheck. It made a huge difference.

QUINN 00:17:01

You mentioned SEIU having a certain appeal as a union for you. Being more social justice oriented and things like that.

VICKI 00:17:09

No, no it wasn't SEIU at the time. 1199 New York.

QUINN 00:17:16

1199 New York was appealing to you because of the way that they organized. I'm curious, what did you witness, the industrial organizing model? How did that play out for you? [inaudible] _____

VICKI 00:17:35

We were just organizing nurses at that moment, but the intent was to go forward and organize. The other folks were in a different Local, the Service Group was in a Local Six. And then we did the new strength and unity

plan where we brought everybody in an institution to the same local. Organizing the whole house, kind of thing, was in our minds.

QUINN 00:18:20

And what about that appealed to you?

VICKI 00:18:23

Stronger Together. We knew that we would be stronger together. We haven't had to go under any long strikes at Group Health - now we're Kaiser - I think we've been on the picket line, probably five times over all. One day strike, two day strike, five day strike, strike over on the Eastern Washington side.

QUINN 00:18:56

Very cool. What difference did you see you make specifically in the membership and the quality of care subsequently after the formation [inaudible] _____

VICKI 00:19:10

Staffing is always the biggest issue in healthcare. If you don't have the right staff, you can't take good care of the patients. We had a joint Labor Management Committee that dealt with staffing, and was pretty effective over the years. I mean, we would come to the committee saying, Look, this is what we need. This is why we need it. And eventually, we almost always made some changes to improve things. So I think the work we did on staffing, probably the biggest success in terms of care for the patients.

QUINN 00:20:03

Absolutely. Reflecting on all of those, what do you think were the specific moments for you that stand out in your mind along this journey of organizing Group Health?

VICKI 00:20:20

Well, it was very significant when we joined SEIU. That was probably the year before we went on that strike in '89. Because without the help of SEIU, which had the resources to help us have a hugely effective strike, I don't think we would have succeeded. I don't think it would have been as effective. The alignment with SEIU was huge.

And then the—what we call the Nurse Wars when other hospitals decided they wanted to join the union, too. We were suddenly in this timeframe where if we didn't jump in and help organize them, they were going to go with somebody else. We wanted them to join us.

It wasn't too long after the '89 strike that the Nurse War broke out. All the activists had to jump from the picket line into this, Can you go visit this group [at] Swedish or, you know, Here or There or Everywhere. We kept ourselves quite busy during that timeframe trying to organize new groups into the union.

QUINN 00:21:55

And ultimately, what was the success of that? [inaudible] _____

VICKI 00:21:59

We won most of the elections. The UFCW won some. WSNA held onto some. The union grew, and it keeps growing. Every year we organize new people into the union.

QUINN 00:22:25

Just two more questions. After hearing your whole story, I would love to know, for you personally, what it's all meant to you and what union membership has meant to you. You mentioned your family, but also you have lots of co-workers that you've organized with, and you've met so many [inaudible] _____. All that coming together, [inaudible] _____

VICKI 00:23:13

I moved out here from Massachusetts, and went to school at the UW [University of Washington] to get my nursing degree. I had a child and got divorced, and my entire family is in the Boston area. I'm the only one that strayed. The Union to me has been sort of like family. *(pause)* The connections, the camaraderie [inaudible]

QUINN 00:23:53

Is there anything else that you think you should cover? Or that you'd like to address in your whole way of organizing at Group Health?

VICKI 00:24:05

Well, my daughter grew up on a picket line, basically (laughs). When she was trying to decide on a career, she was thinking about organizing. She became an organizer and is doing a great job. I'm so proud of her.

QUINN 00:24:36

One last thing, you just retired. Congratulations.

VICKI 00:24:39

Thank you.

QUINN 00:24:41

Do you see yourself participating, continuing to participate, in organizing in some way? What are your hopes for the people who are still organizing in healthcare?

VICKI 00:24:52

I definitely plan to be a resource. They know they can call me. We're headed for an election, I'm involved in that and going to be knocking on doors.

Actually, I'm still working as a temp at Kaiser now - one day a week - so I'm still a member, and I'll be an active member.

QUINN 00:25:21

Any words of wisdom for your health care organizers out there?

VICKI 00:25:28

Try to find out what people—what their issues are—before you start talking to them, what's going on in their workplace?

Find out what their concerns are before you start telling them what they should do because they know what they need. You don't know what they need, necessarily. I mean, you have a pretty good guess, but they know what they need. You just know how to get it for them.

QUINN 00:26:02

Thank you so much.